DEPARTMENT	OF HEALTH AND HUMAN SERVICES
HEALTH CARE	FINANCING ADMINISTRATION

FORM APPROVED OMB NO. 0938-0193

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TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE:	
STATE PLAN MATERIAL	0 0 0 0 6	MAINE	
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION:		
	SECURITY ACT (MEDICAID)		
		(-)	
TO: REGIONAL ADMINISTRATION	4. PROPOSED EFFECTIVE DATE((S)	
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	8/1/97;1/1/98;8/1/99		
5. TYPE OF PLAN MATERIAL (CHECK ONE):	0.000,000	10	
☐ NEW STATE PLAN ☐ AMENDMENT TO BE	CONSIDERED AS NEW PLAN		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDM			
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:		
	a. FFY \$		
	b. FFY \$		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPER		
SUPPLEMENT 12 TO ATTACHMENT 2.6-A, PGS 2, 2A;2A-1	OR ATTACHMENT (If Applicable	e):	
10. SUBJECT OF AMENDMENT:			
MORE LIBERAL METHODS OF TREATING INCOME UNDER SECTION 1	1902(2)(2) OF THE ACT		
44 00/50/00/00/00/00/00/00/00/00/00/00/00/0			
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED		
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	COMMISSIONER, DEPT. OF HUMAN SERVICES		
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	COMMISSIONER, DEFT. OF HUMAN SERVICES		
SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:		
Kein W Concommon	_		
13. TYPED NAME:	Christine Zukas-Lessard Acting Director, Bureau of Medical Services #11 State House Station		
Kevin W. Concannon 14. TITLE:			
Commissioner, Maine Department of Human Services			
15. DATE SUBMITTED:	Togus VA Complex	•	
March 31, 1999	Augusta, ME 04333-00	11	
FOR REGIONAL GER			
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Maine			
	ELIGIBILITY UNDER SECTION 1931 OF THE ACT			
The Sta	State covers low-income families and children under section 1931 of the Act.			
	The following groups were included in the AFDC State plan effective July 16, 1996:			
	X Pregnant women with no other eligible children			
	X AFDC children age 18 who are full-time students in a secondary school or in the equivalent level of vocational or technical training.			
<u>X</u>	In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, without modification.			
	methodologies in effect as of July 16, 1996, without modification. Family Size			
	OFFICIAL			
TN No. Supers	sedes Approval Date: 4/11/01 Effective Date: 8/1/97 & 1/1/98			

· Revision:

State:	Maine				
	_The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows: (effective 8/1/97):				
	 When determining countable resources, real property used to produce income will be disregarded. 				
:	When determining countable resources, the cash surrender value of life insurance will be excluded.				
	When determining countable resources, real property the assistance unit is attempti to sell at a reasonable price will be excluded.				
	 4. Exclude all resources up to \$2,000. 5. When determining countable income, all payments from Job Training Partnership Act of 1982 and the Job Corps will be excluded except on-the-job training income of an individual to the state of the state of				
	individual who is at least 19 years old and who is not a dependent child.6. When determining countable income, exclude wages of individuals under the age of as long as they are full-time students not employed full time.				
	 When determining countable income, exclude from non-recurring lump sum income, any amount used within 30 days of receipt for any of these purposes: 				
	 Expenses for education or job training to attend an accredited or approved post secondary education or training institution; 				
	b. The purchase or repair of a home that is the principal residence;c. The purchase or repair of a vehicle used for transportation to work or to attend an education or training program;				
	d. Capital to start a small business for any individual in the assistance unit age 18 years of age or older.				
	In addition, exclude as income up to \$10,000 used within 30 days of receipt for any of the following purposes:				
	 Health care costs of a member of the assistance unit that are medically necessary and that are not covered by public or private insurance; 				
	 f. To address an emergency that may cause the loss of shelter, employment or othe basic necessities; g. To address other essential needs of the assistance unit approved by the 				
	Department;				
	h. Transferred to a Family Development Account authorized by Maine state law or to a separate identifiable account.				
;	8. When determining countable resources, exclude up to \$10,000 of non-recurring lump sum income transferred to a Family Development Account authorized by state law or to a report identifiable account. Withdrawals must be used for (a) - (h) above in order for the account to remain an excluded resource.				
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TN No.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Maine				
	(The income and resource methodologies that the less restrictive methodologies replace are as follows:)				
	 Property used to produce income was countable, The cash surrender value of life insurance was countable, Real property the assistance unit is attempting to sell was a countable resource, All resources in excess of \$1,000 were counted, Payments from Job Training Partnership Ace of 1982 and the Job Corps to parents of those under age 21 or caretaker relatives was counted. Such payments to those under age 21 were excluded for only 6 months in a calendar year, Wages of individuals under the age of 21 who are full time students or part-time students not employed full-time was excluded for only 6 months in a calendar year, When determining countable income, all items were included as non-recurring lump sum income, When determining countable resources, there was no (0) exclusion for non-recurring lump sum income transferred to a Family Development Account or to a separate identifiable account. 				
	The Agency terminates medical assistance (except for certain pregnant women and children) for individuals who fail to meet TANF work requirements.				
	The agency continues to apply the following waivers of provisions of Part A of title IV in effect as of July 16, 1996 and approved by the Secretary on or before July 1, 1997.				

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TN No.	00-006		
Supersedes		Approval Date: 4/11/01	Effective Date: 8/1/97
TN No			